

10/25/01
1048 U.S. PTO

12-05-01

A

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.:	CM04066H
	First Inventor:	Drawert, Bruce M.
	Title:	BASE SITE AND METHOD FOR GPS-BASED REGIONAL TIME SYNCHRONIZATION
	Express Mail Label No.:	ET194826841US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing)
2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27
3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="15"/> (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure
4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="2"/>
5. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76

7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CFR) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); ii. <input type="checkbox"/> or paper c. <input type="checkbox"/> Statements verifying identify of above copies

ACCOMPANYING APPLICATION PARTS	
9. <input type="text" value="2"/>	Assignment Papers (cover sheet & document(s))
10. <input type="checkbox"/> 37 CFR 3.73(b)	<input type="checkbox"/> Power of Attorney Statement (when there is an assignee)
11. <input type="checkbox"/>	English Translation Document (if applicable)
12. <input type="checkbox"/> IDS	<input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/>	Preliminary Amendment
14. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503)
15. <input type="checkbox"/>	Certified Copy of Priority Document
16. <input type="checkbox"/>	Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. <input type="checkbox"/>	Other: _____

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) Prior Appl. No. <input type="text"/>			
Prior Appl. information:		Examiner: <input type="text"/>	Group/Art Unit: <input type="text"/>
<small>For CONTINUATION OR DIVISIONAL APPS only The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts</small>			

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	 22917	or <input type="checkbox"/> Correspondence address below
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Name	Jeffrey K. Jacobs						
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	1303 E. Algonquin Rd.						
City	Schaumburg	State	IL	Zip Code	60196		
Country	U.S.A.	Telephone	847-576-5562	Fax	847-576-3750		
Name	Jeffrey K. Jacobs	Registration No.	44,798				

SIGNATURE		Date	10/25/01
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FEE TRANSMITTAL Patent fees are subject to annual revision		Complete if Known	
		Application Number	
		Filing Date	October 25, 2001
		First Named Inventor	Drawert, Bruce M.
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT	(\$) 780.00	Attorney Docket No.	CM04066H

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																																																																																																																							
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number 13-4772 Deposit Account Name Motorola, Inc. <input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late Provisional filing</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2520</td><td>147</td><td>2520</td><td>For filing a request for ex parte Reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1840*</td><td>113</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1510</td><td>138</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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102	84	202	42	Independent claims in excess of 3																																																																																																																																																																																																																					
104	280	204	140	Multiple dependent claim, if not paid																																																																																																																																																																																																																					
109	84	209	42	* Reissue independent claims over original patent																																																																																																																																																																																																																					
110	18	210	9	* Reissue claims in excess of 20 and over original Patent																																																																																																																																																																																																																					
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SUBMITTED BY Name (Print/Type) Jeffrey K. Jacobs Signature 		Complete (if applicable) Registration No. 44,798 Telephone 847-576-5562 Date 10/25/01																																																																																																																																																																																																																							

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